Company Tracking Number: CF AR08682CGR01

TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied

Lines)

Product Name: Commercial Property

Project Name/Number: 2008 C/L Property/CF AR08682CGR01

Filing at a Glance

Companies: Sentry Insurance a Mutual Company, Middlesex Insurance Company, Sentry Select Insurance Company

Product Name: Commercial Property SERFF Tr Num: SEPX-125796036 State: Arkansas

TOI: 01.0 Property SERFF Status: Closed State Tr Num: EFT \$25

Sub-TOI: 01.0001 Commercial Property (Fire Co Tr Num: CF AR08682CGR01 State Status: Fees verified and

and Allied Lines) received

Filing Type: Rule Co Status: Reviewer(s): Betty Montesi,

Llyweyia Rawlins, Brittany Yielding

Author: SPI SentryInsurancePC Disposition Date: 09/02/2008

Date Submitted: 08/28/2008 Disposition Status: Exempt from

Review

Effective Date Requested (New): 11/01/2008 Effective Date (New): 11/01/2008

Effective Date Requested (Renewal): 11/01/2008 Effective Date (Renewal):

11/01/2008

State Filing Description:

General Information

Project Name: 2008 C/L Property Status of Filing in Domicile: Authorized

Project Number: CF AR08682CGR01 Domicile Status Comments:

Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:

Filing Status Changed: 09/02/2008

State Status Changed: 09/02/2008 Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

We have submitted a form filing, our company filing # CF AR08682CGF01, to revise our Equipment Breakdown endorsements; CP 70 47 (Special Form), CP 70 48 (Basic Form) and CP 70 49 (Broad Form). In these endorsements we have increased four sub-limits in the forms for no additional charge. The Pollution Clean Up and Removal additional coverage, the Refrigerant Contamination additional coverage extension, the Expediting Expense additional coverage

SERFF Tracking Number: SEPX-125796036 State: Arkansas
First Filing Company: Sentry Insurance a Mutual Company, ... State Tracking Number: EFT \$25

Company Tracking Number: CF AR08682CGR01

TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied

Lines)

Product Name: Commercial Property

Project Name/Number: 2008 C/L Property/CF AR08682CGR01

extension, and the Consequential Loss coverage (loss of perishable goods due to spoilage) sub-limits have been increased to \$100,000 from \$25,000.

In addition we are introducing a new endorsement, Equipment Breakdown Deductible,

CP 70 54 08 08. This optional endorsement will be called for when a deductible amount other than the property deductible amount is to be applied to the Equipment Breakdown causes of loss. The deductible amount(s) shown in the endorsement will apply in the event of an Equipment Breakdown loss.

In response to this new optional coverage, we are filing revised rule pages. For Sentry Insurance a Mutual Company and Middlesex Insurance Company the following manual pages are revised:

" CF-AR-10 11-2008 replaces CF-AR-10 09-2005

" CF-AR-11 11-2008 replaces CF-AR-11 09-2005

For Sentry Select Insurance Company the following manual pages are revised:

" CF-DP-6 11-2008 replaces CF-DP-6 01-2002

" CF-DP-7 11-2008 replaces CF-DP-7 09-2005

Please refer to the rule memorandum for further detail.

Company and Contact

Filing Contact Information

Douglas Krueger, Compliance/Development Sr. doug.krueger@sentry.com

Analyst

1800 North Point Drive (715) 346-8614 [Phone] Stevens Point, WI 54481 (715) 346-6044[FAX]

Filing Company Information

SERFF Tracking Number: SEPX-125796036 State: Arkansas
First Filing Company: Sentry Insurance a Mutual Company, ... State Tracking Number: EFT \$25

Company Tracking Number: CF AR08682CGR01

TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied

Lines)

Product Name: Commercial Property

Project Name/Number: 2008 C/L Property/CF AR08682CGR01

Sentry Insurance a Mutual Company CoCode: 24988 State of Domicile: Wisconsin

1800 North Point Drive Group Code: 169 Company Type:
Stevens Point, WI 54481 Group Name: Sentry Insurance State ID Number:

Group

(715) 346-6000 ext. [Phone] FEIN Number: 39-0333950

Middlesex Insurance Company CoCode: 23434 State of Domicile: Wisconsin

1800 North Point Drive Group Code: 169 Company Type:
Stevens Point, WI 54481 Group Name: Sentry Insurance State ID Number:

Group

(715) 346-6000 ext. [Phone] FEIN Number: 04-1619070

Sentry Select Insurance Company CoCode: 21180 State of Domicile: Wisconsin

1800 North Point Drive Group Code: 169 Company Type:
Stevens Point, WI 54481 Group Name: Sentry Insurance State ID Number:

Group

(715) 346-6000 ext. [Phone] FEIN Number: 36-2674180

Company Tracking Number: CF AR08682CGR01

TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied

Lines)

Product Name: Commercial Property

Project Name/Number: 2008 C/L Property/CF AR08682CGR01

Filing Fees

Fee Required? Yes
Fee Amount: \$25.00
Retaliatory? No

Fee Explanation:

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #
Sentry Insurance a Mutual Company \$25.00 08/28/2008 22184388

Middlesex Insurance Company \$0.00 08/28/2008

Sentry Select Insurance Company \$0.00 08/28/2008

Company Tracking Number: CF AR08682CGR01

TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied

Lines)

Product Name: Commercial Property

Project Name/Number: 2008 C/L Property/CF AR08682CGR01

Correspondence Summary

Dispositions

Status Created By Created On Date Submitted

Exempt from Llyweyia Rawlins 09/02/2008 09/02/2008

Review

SERFF Tracking Number: SEPX-125796036 State: Arkansas
First Filing Company: Sentry Insurance a Mutual Company, ... State Tracking Number: EFT \$25

Company Tracking Number: CF AR08682CGR01

TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied

Lines)

Product Name: Commercial Property

Project Name/Number: 2008 C/L Property/CF AR08682CGR01

Disposition

Disposition Date: 09/02/2008 Effective Date (New): 11/01/2008 Effective Date (Renewal): 11/01/2008

Status: Exempt from Review

Comment:

This line is exempt from filing rates/rules in compliance with ACA 23-67-206 which states that P&C insurance for commercial risks, excluding workers' compensation, employers' liability and professional liability insurance, including but not limited to, medical malpractice insurance, are exempted from the rate/rule filing and review requirements.

Rate data does NOT apply to filing.

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing0.000%Overall Percentage Rate Impact For This Filing0.000%Effect of Rate Filing-Written Premium Change For This Program\$0Effect of Rate Filing - Number of Policyholders Affected0

Company Tracking Number: CF AR08682CGR01

TOI: 01.00 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied

Lines)

Product Name: Commercial Property

Project Name/Number: 2008 C/L Property/CF AR08682CGR01

Item Type	Item Name	Item Status	Public Access
Supporting Document	Cover Letter	Accepted for	Yes
		Informational Purposes	
Supporting Document	Rule Memorandum	Accepted for	Yes
		Informational Purposes	
Supporting Document	AR - NAIC P&C TRANSMITTAL	Accepted for	Yes
	DOCUMENT	Informational Purposes	
Supporting Document	AR - NAIC RATE RULE FILING	Accepted for	Yes
	SCHEDULE	Informational Purposes	
Rate	Commercial Lines Manual Division Five -	Accepted for	Yes
	Fire and Allied Lines Additional Rules	Informational Purposes	
Rate	Commercial Lines Manual Division Five -	Accepted for	Yes
	Fire and Allied Lines Additional Rules	Informational Purposes	
Rate	Commercial Lines Manual Division Five -	Accepted for	Yes
	Fire and Allied Lines Dealers Program	Informational Purposes	
	Commercial Property Coverage Part		
Rate	Commercial Lines Manual Division Five -	Accepted for	Yes
	Fire and Allied Lines Dealers Program	Informational Purposes	
	Commercial Property Coverage Part		

Company Tracking Number: CF AR08682CGR01

TOI: 01.00 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied

Lines)

Product Name: Commercial Property

Project Name/Number: 2008 C/L Property/CF AR08682CGR01

Rate Information

Rate data does NOT apply to filing.

Company Tracking Number: CF AR08682CGR01

TOI: 01.00 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied

Lines)

Product Name: Commercial Property

Project Name/Number: 2008 C/L Property/CF AR08682CGR01

Coverage Part

Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Accepted for Informational Purposes	Commercial Lines Manual Division Five Fire and Allied Lines Additional Rules	CF-AR-10 -	Replacement	CF-AR-10.PDF
Accepted for Informational Purposes	Commercial Lines Manual Division Five Fire and Allied Lines Additional Rules	CF-AR-11 -	Replacement	CF-AR-11.PDF
Accepted for Informational Purposes	Commercial Lines Manual Division Five Fire and Allied Lines Dealers Program Commercial Property Coverage Part	CF-DP-6	Replacement	CF-DP-6.PDF
Accepted for Informational Purposes	Commercial Lines Manual Division Five Fire and Allied Lines Dealers Program Commercial Property	CF-DP-7	Replacement	CF-DP-7.PDF

COMMERCIAL LINES MANUAL DIVISION FIVE - FIRE AND ALLIED LINES ADDITIONAL RULES

a) Exposure factors

(1) Business Income (and Extra Expense) Form CP 0)0 30	CP) Form	Expense)	Extra	(and	Income	Business	(1)
---	-------	----	--------	----------	-------	------	--------	----------	-----

Mercantile/Non-Manufacturing	.56
Manufacturing	.66
Rental Property/Private Warehouse	.34

(2) Business Income (Without Extra Expense) Form CP 00 32

Mercantile/Non-Manufacturing	.50
Manufacturing	.60
Rental Property/Private Warehouse	.30

b) Rate Modification

(1) Business Income (and Extra Expense) Form CP 00 30

Mercantile/Non-Manufacturing	.55
Manufacturing	.65
Rental Property/Private Warehouse	.50

(2) Business Income (Without Extra Expense) Form CP 00 32

Mercantile/Non-Manufacturing	.50
Manufacturing	.59
Rental Property/Private Warehouse	.45

Rule 74-1 EQUIPMENT BREAKDOWN COVERAGE

A. Description of Coverage. Equipment Breakdown Coverage will be added to all policies to insure Covered Property against loss resulting from pressure vessels, electrical damage, and mechanical breakdown.

B. Forms

- 1. Attach endorsement CP 70 47 to policies that contain the Causes of Loss Special Form.
- Attach endorsement CP 70 48 to policies that contain the Causes of Loss Basic Form.
- 3. Attach endorsement CP 70 49 to policies that contain the Causes of Loss Broad Form.
- Optional endorsement CP 70 54 will be attached to policies where the equipment breakdown deductible amount is different from the property deductible amount.
- 5. Other endorsements may be attached as appropriate.

C. Coverage Options

- 1. Increased Consequential Loss Limit. The standard limit of \$100,000 may be increased by displaying a higher limit of insurance in the declarations.
- Increased Refrigerant Contamination Limit. The standard limit of \$100,000 may be increased by displaying a higher limit of insurance in the declarations.

SENTRY INSURANCE A MUTUAL COMPANY
MIDDLESEX INSURANCE COMPANY
PATRIOT GENERAL INSURANCE COMPANY
SENTRY LLOYDS OF TEXAS
CF-AR-10

COMMERCIAL LINES MANUAL DIVISION FIVE - FIRE AND ALLIED LINES ADDITIONAL RULES

D. Premium Determination

All Accounts

Multiply the limit of insurance for subject property by the Equipment Breakdown rate.

- 2. No premium charge is required for the following property:
 - a) Property under construction
 - b) Property in the open and outdoor property
 - c) Property of others
 - d) Household property
 - e) Property at undeclared locations
- Increased Consequential Loss Limit. Refer to reinsurance company for adjusted rates.
- Increased Refrigeration Contamination Limit. Refer to reinsurance company for adjusted rates.
- 5. Equipment Breakdown Rate. \$.026 per \$100 of Total Insured Value. This rate will be increased to reflect the following (when applicable):
 - a) Increased Consequential Loss Limit
 - b) Increased Refrigeration Contamination Limit
 - c) Cost of facultative reinsurance

Rule 74-2 Reserved for future use.

Rule 74-3 FALSE PRETENSE COVERAGE

- A. Description of Coverage. This coverage applies to property the insured rents or leases to another party and to property temporarily away from the insured's premises for demonstration or trial. The Voluntary Parting exclusion does not apply to this property when False Pretense Coverage is written.
- B. Limit of Insurance. The limit of insurance will be displayed in the declarations; limits available are \$25,000, \$50,000 or \$100,000 per occurrence.
- C. Deductible. The deductible is \$250.

COMMERCIAL LINES MANUAL DIVISION FIVE - FIRE AND ALLIED LINES DEALERS PROGRAM COMMERCIAL PROPERTY COVERAGE PART

AL, AK, CA, CO, FL, ID, IA, LA, ME, MI, MS, NH, NY .25 NC, ND, OH, SC, SD, TX, VT, VA, WI, WY

b. For earthquake, apply the rates and factors for earthquake using 50% coinsurance rating rules for mercantile or nonmanufacturing risks.

Coverage Options

- a If the sale of autos and whole goods is to be excluded from coverage, attach form FA 000700 and base the premium for this coverage on one half of the insured's gross margin or gross profit from their income statements.
- Except as indicated below, the Optional Coverage rules and rates from rule 51.
 Business Income Coverage Options, and rule 54. Common Time Element Options, will apply.

The following options from rule 51. are not available with Enhanced Annual Business Income coverage.

Option A	Agreed Value
Option F	Maximum Period of Indemnity
Option G	Monthly Limit of Indemnity
Option J	Power, Heat & Refrigeration Deduction-
·	-Manufacturing or Mining Risks
Option K	Seasonal Leases - Monthly Loss Payments I
Option L	Tuition and Fees

NET INCOME CLARIFICATION

When form FA 000700 is used with form CP 00 30 or form CP 00 32, the coverage amount shall recognize the reduction in exposure.

J. EQUIPMENT BREAKDOWN COVERAGE

1) Description of Coverage. Equipment Breakdown Coverage may be added to all policies to insure Covered Property against loss resulting from pressure vessels, electrical damage, and mechanical breakdown.

2) Forms

I.

- a) Attach endorsement CP 70 47 to policies that contain the Causes of Loss Special Form.
- b) Attach endorsement CP 70 48 to policies that contain the Causes of Loss Basic Form.
- c) Attach endorsement CP 70 49 to policies that contain the Causes of Loss Broad Form.
- d) Optional endorsement CP 70 54 will be attached to policies where the equipment breakdown deductible amount is different from the property deductible amount.
- e) Other endorsements may be attached as appropriate.

Coverage Options

a) Increased Consequential Loss Limit. The standard limit of \$100,000 may be increased by displaying a higher limit of insurance in the declarations.

Limits

COMMERCIAL LINES MANUAL DIVISION FIVE - FIRE AND ALLIED LINES DEALERS PROGRAM COMMERCIAL PROPERTY COVERAGE PART

b) Increased Refrigerant Contamination Limit. The standard limit of \$100,000 may be increased by displaying a higher limit of insurance in the declarations.

4) Premium Determination

a) All Accounts

Multiply the limit of insurance for subject property by the Equipment Breakdown rate.

- b) No premium charge is required for the following property:
 - (1) Property under construction
 - (2) Property in the open and outdoor property
 - (3) Property of others
 - (4) Household property
 - (5) Property at undeclared locations
- c) Increased Consequential Loss Limit. Refer to reinsurance company for adjusted rates.
- Increased Refrigeration Contamination Limit. Refer to reinsurance company for adjusted rates.
- e) Equipment Breakdown Rate. \$0.020 per \$100 of Total Insured Value. This rate will be increased to reflect the following (when applicable):
 - (1) Increased Consequential Loss Limit
 - (2) Increased Refrigeration Contamination Limit
 - (3) Cost of facultative reinsurance

K. ELECTRONIC MEDIA AND RECORDS COVERAGE

- 1. Description of Coverage. This form is used when electronic media and records are insured as a separate item.
- 2. Form. Use endorsements CP 70 43.
- Rule. The Causes of Loss Special Form must apply to covered property.
- **4.** Rate. Multiply the Basic Group 1 rate that applies to personal property at the premises by 1.82.
- **5.** Premium Determination. Multiply the limit of insurance by the rate.

SERFF Tracking Number: SEPX-125796036 State: Arkansas
First Filing Company: Sentry Insurance a Mutual Company, ... State Tracking Number: EFT \$25

Company Tracking Number: CF AR08682CGR01

TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied

Lines)

Product Name: Commercial Property

Project Name/Number: 2008 C/L Property/CF AR08682CGR01

Supporting Document Schedules

Review Status:

Satisfied -Name: Cover Letter Accepted for Informational 09/02/2008

Purposes

Comments:

Attachment:

Cover Letter.PDF

Review Status:

Satisfied -Name: Rule Memorandum Accepted for Informational 09/02/2008

Purposes

Comments:

Attachment:

Rule Memorandum.PDF

Review Status:

Purposes

Satisfied -Name: AR - NAIC P&C TRANSMITTAL Accepted for Informational 09/02/2008

DOCUMENT

Comments:

Attachment:

AR - NAIC P&C TRANSMITTAL DOCUMENT.PDF

Review Status:

Purposes

Satisfied -Name: AR - NAIC RATE RULE FILING Accepted for Informational 09/02/2008

SCHEDULE

Comments:

Attachment:

AR - NAIC RATE RULE FILING SCHEDULE.PDF

Sentry Insurance a Mutual Company 1800 North Point Drive P.O. Box 8020 Stevens Point, WI 54481-8020



August 28, 2008

Commissioner Julie Benafield Bowman Arkansas Department of Insurance 1200 West Third Street Little Rock, AR 72201-1904

Attn: Property and Casualty Division

SENTRY INSURANCE A MUTUAL COMPANY, NAIC#169-24988, FEID#39-0333950
MIDDLESEX INSURANCE COMPANY, NAIC#169-23434, FEID#04-1619070
SENTRY SELECT INSURANCE COMPNY, NAIC#169-21180, FEID#36-2674180
DEALER OPERATIONS PROGRAM
COMMERCIAL LINES FIRE - DIVISION FIVE
RULE FILING
COMPANY FILING #CF AR08682CGR01
REFERENCE FORM FILING #: CF AR08682CGF01
PROPOSED WRITTEN DATE: 11/1/2008

We have submitted a form filing, our company filing # CF AR08682CGF01, to revise our Equipment Breakdown endorsements; CP 70 47 (Special Form), CP 70 48 (Basic Form) and CP 70 49 (Broad Form). In these endorsements we have increased four sub-limits in the forms for no additional charge. The Pollution Clean Up and Removal additional coverage, the Refrigerant Contamination additional coverage extension, the Expediting Expense additional coverage extension, and the Consequential Loss coverage (loss of perishable goods due to spoilage) sub-limits have been increased to \$100,000 from \$25,000.

In addition we are introducing a new endorsement, Equipment Breakdown Deductible, CP 70 54 08 08. This optional endorsement will be called for when a deductible amount other than the property deductible amount is to be applied to the Equipment Breakdown causes of loss. The deductible amount(s) shown in the endorsement will apply in the event of an Equipment Breakdown loss.

In response to this new optional coverage, we are filing revised rule pages. For Sentry Insurance a Mutual Company and Middlesex Insurance Company the following manual pages are revised:

- CF-AR-10 11-2008 replaces CF-AR-10 09-2005
- CF-AR-11 11-2008 replaces CF-AR-11 09-2005

For Sentry Select Insurance Company the following manual pages are revised:

- CF-DP-6 11-2008 replaces CF-DP-6 01-2002
- CF-DP-7 11-2008 replaces CF-DP-7 09-2005

Please refer to the rule memorandum for further detail.

Please notify me if you have any questions and/or concerns.

Sincerely,

Douglas D. Krueger

Compliance/Development Analyst

715 346-8614

715 346-6044(fax)

Doug.Krueger@sentry.com

Rule Memorandum

SENTRY INSURANCE A MUTUAL COMPANY MIDDLESEX INSURANCE COMPANY (IF APPLICABLE) PATRIOT GENERAL INSURANCE COMPANY (IF APPLICABLE)

Manual Page	Replaces	Description of Change
CF-AR-10 11-2008	CF-AR-10 09-2005	We are revising Equipment Breakdown rule pages to show: 1. the introduction of an optional endorsement, CP 70 54 08 08 Equipment Breakdown Deductible, which is used to specify a deductible amount, which is different from the policy's property deductible, for Equipment Breakdown losses. 2. the revised, increased standard limits for the Consequential Loss Limit and Refrigerant Contamination Limit coverage option from \$25,000 to \$100,000
		Rates are not impacted from the above changes.
CF-AR-11 11-2008	CF-AR-11 09-2005	Editorial in nature. Item D has been moved from the bottom of page CF-AR-10 to the top of this page, CF-AR-11.
		Rates are not impacted from the above changes.

SENTRY SELECT INSURANCE COMPANY – DEALER OPERATIONS PROGRAM

Manual Page	Replaces	Description of Change
CF-DP-6 11-2008	CF-DP-6 01-2002	We are revising Equipment Breakdown rule pages to show: 2. the introduction of an optional endorsement, CP 70 54 08 08 Equipment Breakdown Deductible, which is used to specify a deductible amount, which is different from the policy's property deductible, for Equipment Breakdown losses. 3. the revised, increased standard limits for the Consequential Loss Limit from \$25,000 to \$100,000.
		Rates are not impacted by the above changes.
CF-DP-7 11-2008	CF-DP-7 09-2005	Revises the standard limits for the Refrigerant Contamination Limit coverage option from \$25,000 to \$100,000
		Rates are not impacted by the above changes.

Property & Casualty Transmittal Document

1.	Reserved for Insurance I	urance Dept. 2. Insurance Department Use only						
	Use Only		a. Date the filing is received:					
			b. Analyst:					
			c. Disposition:					
			d. Date of disposition of the filing:					
		e. Effecti						
			New Bu					
			Renewa	al Business				
		f. State						
		g. SERF	F Filing #	‡ :				
		h. Subjec	ct Codes	i				
							1	
3.	Group Name							Group NAIC #
	Sentry Insurance Group							169
4.	Company Name(s)			Domicile	NAIC #	FEIN:	#	State #
	Sentry Insurance a Mutual C	Company		WI	24988	39-03	33950	
	Middlesex Insurance Compa	any		WI	23434	04-16	19070	
	Sentry Select Insurance Con			WI	21180	36-26	74180	
						00 20		
5.	Company Tracking Number	er CF A	R086820	CGR01				
Conta	ct Info of Filer(s) or Corpora	ate Officer(s) [inclu	de toll-fra	ee numberl				
6.					FAX	#		e-mail
	Name and address	Title		phone #s	FAX	#		e-mail
					FAX	#	doug.ki	
		Title Compliance/Dev	Tele		715-346		doug.ki	e-mail rueger@sentry.co m
	Name and address Douglas D. Krueger	Title Compliance/Dev elopment Sr.	Tele 715-	phone #s			doug.ki	rueger@sentry.co
	Name and address Douglas D. Krueger 1800 North Point Drive	Title Compliance/Dev elopment Sr.	Tele 715-	946-8614			doug.ki	rueger@sentry.co
	Name and address Douglas D. Krueger	Title Compliance/Dev elopment Sr.	Tele 715-	946-8614			doug.ki	rueger@sentry.co
	Name and address Douglas D. Krueger 1800 North Point Drive	Title Compliance/Dev elopment Sr.	Tele 715-	946-8614			doug.ki	rueger@sentry.co
6.	Name and address Douglas D. Krueger 1800 North Point Drive Stevens Point WI 54481	Title Compliance/Dev elopment Sr. Analyst	Tele 715-	946-8614			doug.ki	rueger@sentry.co
7.	Name and address Douglas D. Krueger 1800 North Point Drive Stevens Point WI 54481 Signature of authorized file	Title Compliance/Dev elopment Sr. Analyst	715-Ex	946-8614 t. 8614	715-346		doug.ki	rueger@sentry.co
6.	Name and address Douglas D. Krueger 1800 North Point Drive Stevens Point WI 54481	Title Compliance/Dev elopment Sr. Analyst	715-Ex	946-8614	715-346		doug.ki	rueger@sentry.co
7. 8.	Name and address Douglas D. Krueger 1800 North Point Drive Stevens Point WI 54481 Signature of authorized file Please print name of auth Information (see General Insertice)	Title Compliance/Dev elopment Sr. Analyst er orized filer	715-Ex	346-8614 t. 8614	715-346		doug.ki	rueger@sentry.co
7. 8. Filing	Name and address Douglas D. Krueger 1800 North Point Drive Stevens Point WI 54481 Signature of authorized file Please print name of auth Information (see General Ins	Title Compliance/Dev elopment Sr. Analyst er orized filer structions for descrip	715-Ex Dougle	346-8614 t. 8614 as D. Kruege these fields)	715-346	-6044		rueger@sentry.co m
7. 8. Filing 9. 10.	Name and address Douglas D. Krueger 1800 North Point Drive Stevens Point WI 54481 Signature of authorized file Please print name of auth Information (see General Ins Type of Insurance (TOI) Sub-Type of Insurance (Su	Title Compliance/Dev elopment Sr. Analyst er orized filer structions for descrip	715-Ex Dougle	346-8614 t. 8614 as D. Kruege	715-346	-6044		rueger@sentry.co m
7. 8. Filing	Name and address Douglas D. Krueger 1800 North Point Drive Stevens Point WI 54481 Signature of authorized file Please print name of auth Information (see General Ins Type of Insurance (TOI) Sub-Type of Insurance (Su State Specific Product cod	Title Compliance/Dev elopment Sr. Analyst er orized filer structions for descrip	715-Ex Dougle	346-8614 t. 8614 as D. Kruege these fields)	715-346	-6044		rueger@sentry.co m
7. 8. Filing 9. 10.	Douglas D. Krueger 1800 North Point Drive Stevens Point WI 54481 Signature of authorized file Please print name of auth Information (see General Ins Type of Insurance (TOI) Sub-Type of Insurance (Su State Specific Product cod applicable) [See State Specific	Title Compliance/Dev elopment Sr. Analyst er orized filer structions for descrip lb-TOI) le(s) (if c Requirements]	Tele 715- Ex Dougla otions of 01.0 P 01.000	346-8614 t. 8614 as D. Kruege these fields) property	715-346	-6044		rueger@sentry.co m
7. 8. Filing 9. 10. 11.	Douglas D. Krueger 1800 North Point Drive Stevens Point WI 54481 Signature of authorized file Please print name of auth Information (see General Ins Type of Insurance (TOI) Sub-Type of Insurance (Su State Specific Product cod applicable) [See State Specific Company Program Title (M	Title Compliance/Dev elopment Sr. Analyst er orized filer structions for descrip lb-TOI) le(s) (if c Requirements]	Tele 715- Ex Dougla otions of 01.0 P 01.000	346-8614 t. 8614 as D. Kruege these fields) Property O1 Commerci	715-346	-6044 / (Fire a	nd Allied	rueger@sentry.co m
7. 8. Filing 9. 10.	Douglas D. Krueger 1800 North Point Drive Stevens Point WI 54481 Signature of authorized file Please print name of auth Information (see General Ins Type of Insurance (TOI) Sub-Type of Insurance (Su State Specific Product cod applicable) [See State Specific	Title Compliance/Dev elopment Sr. Analyst er orized filer structions for descrip lb-TOI) le(s) (if c Requirements]	Tele 715- Ex Dougla otions of 01.0 P 01.000 Comm	346-8614 t. 8614 as D. Kruege these fields) roperty of Commercial Prope te/Loss Cost	715-346 r al Property	-6044 / (Fire a	nd Allied	rueger@sentry.co m Lines)
7. 8. Filing 9. 10. 11.	Douglas D. Krueger 1800 North Point Drive Stevens Point WI 54481 Signature of authorized file Please print name of auth Information (see General Ins Type of Insurance (TOI) Sub-Type of Insurance (Su State Specific Product cod applicable) [See State Specific Company Program Title (M	Title Compliance/Dev elopment Sr. Analyst er orized filer structions for descrip lb-TOI) le(s) (if c Requirements]	Tele 715- Ex Dougla otions of 01.000 Comm	346-8614 t. 8614 as D. Kruege these fields) roperty O1 Commerci	715-346 r al Property	-6044 y (Fire a	nd Allied	Lines) Rates/Rules s/Rules/Forms
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Property & Casualty Transmittal Document

20. This filing transmittal is part of Company Tracking # CF AR08682CGR01

21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

We have submitted a form filing, our company filing # CF AR08682CGF01, to revise our Equipment Breakdown endorsements; CP 70 47 (Special Form), CP 70 48 (Basic Form) and CP 70 49 (Broad Form). In these endorsements we have increased four sub-limits in the forms for no additional charge. The Pollution Clean Up and Removal additional coverage, the Refrigerant Contamination additional coverage extension, the Expediting Expense additional coverage extension, and the Consequential Loss coverage (loss of perishable goods due to spoilage) sub-limits have been increased to \$100,000 from \$25,000.

In addition we are introducing a new endorsement, Equipment Breakdown Deductible, CP 70 54 08 08. This optional endorsement will be called for when a deductible amount other than the property deductible amount is to be applied to the Equipment Breakdown causes of loss. The deductible amount(s) shown in the endorsement will apply in the event of an Equipment Breakdown loss.

In response to this new optional coverage, we are filing revised rule pages. For Sentry Insurance a Mutual Company and Middlesex Insurance Company the following manual pages are revised:

- " CF-AR-10 11-2008 replaces CF-AR-10 09-2005
- " CF-AR-11 11-2008 replaces CF-AR-11 09-2005

For Sentry Select Insurance Company the following manual pages are revised:

- " CF-DP-6 11-2008 replaces CF-DP-6 01-2002
- " CF-DP-7 11-2008 replaces CF-DP-7 09-2005

Please refer to the rule memorandum for further detail.

22. Filing Fees (Filer must provide check # and fee amount if applicable.)

[If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #: NA Amount: \$25.00

To be sent via EFT

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

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^{***}Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

PROPERTY & CASUALTY RATE/RULE FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.) This filing transmittal is part of Company Tracking # CF AR08682CGR01 This filing corresponds to form filing number 2. (Company tracking number of form filing, if applicable) Rate Increase Rate Decrease \boxtimes Rate Neutral (0%) 3. Filing Method (Prior Approval, File & Use, Flex Band, etc.) USE and File Rate Change by Company (As Proposed) 4a. Written **Company Name** Overall % Overall # of Written Maximum **Minimum** Indicated % Rate Premium policyholders premium %Change %Change Change Change **Impact** affected for this (where (where for this (when for this program required) required) Applicable) program program 0 Sentry Insurance a 0 0 0 0 O 0 Mutual Company Middlesex Insurance 0 0 0 0 0 0 0 Company Sentry Select Insurance 0 0 0 0 0 0 0 Company 4b. Rate Change by Company (As Accepted) For State Use Only **Company Name** Overall % Overall Written Written Maximum Minimum # of premium Indicated % Rate Premium policyholders %Change %Change Change **Impact** Change affected for this (where (where for this for this (when program required) required) Applicable) program program 5. Overall Rate Information (Complete for Multiple Company Filings only) **COMPANY USE** STATE USE Overall percentage rate indication(when applicable) 5a. Overall percentage rate impact for this filing Effect of Rate Filing – Written premium change for this 5c. 5d. Effect of Rate Filing - Number of policyholders affected 6. Overall percentage of last rate revision Effective Date of last rate revision 7. Filing Method of Last filing 8. (Prior Approval, File & Use, Flex Band, etc.) Rule # or Page # Submitted Replacement Previous state 9. for Review or withdrawn? filing number, if required by state ☐ New CF-AR-10 11-2008 Replacement 01 Withdrawn New Replacement 02 CF-AR-11 11-2008

Effectiv	ve March 1, 2007		
03	CF-DP-6 11-2008	☐ New ☐ Replacement ☐ Withdrawn	

PROPERTY & CASUALTY RATE/RULE FILING SCHEDULE (cont.)

State	e: Arkansas	Company Tracking	g# <u>CF AR08682CGR01</u>	Page	2	of_	2		
9.	Rule # or Page # Submitted for Review		cement ndrawn?	Previous state filing number, if required by st					
04	CF-DP-7 11-2008	<u> </u>	w placement hdrawn						